

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m G</i>		<i>2/10/00</i>
O.I.P.E. CLASSIFIER		<i>1022500</i>	
FORMALITY REVIEW		<i>1022500</i>	
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ∴ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	<i>9/22/02</i>
2	<i>5-5/11/03</i>
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Claim	Date
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Original	
51	<i>5/14/03</i>
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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